

**REQUEST PERTAINING
TO MILITARY RECORDS**

To ensure the best possible service, please thoroughly review the instructions at the bottom before filling out this form. Please print clearly or type. If you need more space, use plain paper.

SECTION I - INFORMATION NEEDED TO LOCATE RECORDS (Furnish as much as possible.)

1. NAME USED DURING SERVICE (Last, first, and middle)	2. SOCIAL SECURITY NO.	3. DATE OF BIRTH	4. PLACE OF BIRTH

5. SERVICE, PAST AND PRESENT (For an effective records search, it is important that ALL service be shown below.)

BRANCH OF SERVICE	DATES OF SERVICE		CHECK ONE		SERVICE NUMBER DURING THIS PERIOD (If unknown, please write unknown)
	DATE ENTERED	DATE RELEASED	OFFICER	ENLISTED	
a. ACTIVE SERVICE					
b. RESERVE SERVICE					
c. NATIONAL GUARD					

6. IS THIS PERSON DECEASED? If "YES" enter the date of death. <input type="checkbox"/> NO <input type="checkbox"/> YES _____	7. IS (WAS) THIS PERSON RETIRED FROM MILITARY SERVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO
--	---

SECTION II - INFORMATION AND/OR DOCUMENTS REQUESTED

1. REPORT OF SEPARATION (DD Form 214 or equivalent). This contains information normally needed to verify military service. A copy may be sent to the veteran, the deceased veteran/s next of kin, or other persons or organizations if authorized in Section III, below. NOTE: If more than one period of service was performed, even in the same branch, there may be more than one Report of Separation. Be sure to show EACH year that a Report of Separation was issued, for which you need a copy.

☐ An **UNDELETED** Report of Separation is requested for the year(s) _____

This normally will be a copy of the full separation document including such sensitive items as the character of separation, authority for separation, reason for separation, reenlistment eligibility code, separation (SPD/SPN) code, and dates of time lost. An undeleted version is ordinarily required to determine eligibility for benefits.

☐ A **DELETED** Report of Separation is requested for the year(s) _____

The following information will be deleted from the copy sent: authority for separation, reason for separation, reenlistment eligibility code, separation (SPD/SPN) code, and for separations after June 30, 1979, character of separation and dates of time lost.

2. OTHER INFORMATION AND/OR DOCUMENTS REQUESTED _____

3. PURPOSE (OPTIONAL - An explanation of the purpose of the request is strictly voluntary. Such information may help the agency answering this request to provide the best possible response and will in no way be used to make a decision to deny the request.) _____

SECTION III - RETURN ADDRESS AND SIGNATURE

1. REQUESTER IS

☐ Military service member or veteran identified in Section I, above

☐ Legal guardian (must submit copy of court appointment)

☐ Next of kin of deceased veteran _____
(relation)

☐ Other (specify) _____

2. SEND INFORMATION/DOCUMENTS TO
(Please print or type. See instruction 3, below.)

3. AUTHORIZATION SIGNATURE REQUIRED (See instruction 2, below.)
I declare (or certify, verify, or state) under penalty of perjury under the laws of the United States of America that the information in this Section III is true and correct.

Name _____
Street _____
City _____

Signature of Requester (Please do not print.) _____
()
Date of this request _____ Daytime phone _____
E-mail address _____

3. **Definitions and abbreviations.** DISCHARGED -- the individual has no current military status; HEALTH -- Records of physical examinations, dental treatment, and outpatient medical treatment received while in a duty status (does not include records of treatment while hospitalized); TDRL -- Temporary Disability Retired List.
4. **Service completed before World War I.** The oldest records pertaining to military service veterans are at the National Archives, for service that was completed before the following dates: ARMY -- enlisted, 11/1/1912, officer, 7/1/1917; NAVY -- enlisted, 1/1/1886, officer, 1/1/1903; MARINE CORPS -- 1/1/1905; COAST GUARD -- 1/1/1898. National Archives Trust Fund (NATF) forms must be used to request these records. Obtain the forms by e-mail from inquire@nara.gov or write to the Code 6 address.

BRANCH	CURRENT STATUS OF SERVICE MEMBER	WHERE TO WRITE ADDRESS CODE
AIR FORCE	Discharged, deceased, or retired with pay (See paragraph 1, above, if requesting health record.)	14
	Active (including National Guard on active duty in the Air Force), TDRL, or general officers retired with pay	1
	Reserve, retired reserve in nonpay status, current National Guard officers not on active duty in the Air Force, or National Guard released from active duty in the Air Force	2
	Current National Guard enlisted not on active duty in the Air Force	13
COAST GUARD	Discharged, deceased, or retired (See paragraph 1, above, if requesting health record.)	14
	Active, reserve, or TDRL	3
MARINE CORPS	Discharged, deceased, or retired (See paragraph 1, above, if requesting health record.)	14
	Individual Ready Reserve or Fleet Marine Corps Reserve	5
	Active, Selected Marine Corps Reserve, or TDRL	4
ARMY	Discharged, deceased, or retired (See paragraph 1, above, if requesting health record.)	14
	Reserve; or active duty records of current National Guard members who performed service in the U.S. Army before 7/1/72	7
	Active enlisted (including National Guard on active duty in the U.S. Army) or TDRL enlisted	9
	Active officers (including National Guard on active duty in the U.S. Army) or TDRL officers	8
	Current National Guard enlisted not on active duty in Army (including records of Army active duty performed after 6/30/72)	13
	Current National Guard officers not on active duty in Army (including records of Army active duty performed after 6/30/72)	12
NAVY	Discharged, deceased, or retired (See paragraph 1, above, if requesting health record.)	14
	Active, reserve, or TDRL	10

ADDRESS LIST OF CUSTODIANS (BY CODE NUMBERS SHOWN ABOVE) - where to write/send this form					
1	Air Force Personnel Center HQ AFPC/DPSRP 550 C Street West, Suite 19 Randolph AFB, TX 78150-4721	5	Marine Corps Reserve Support Command (Code MMI) 15303 Andrews Road Kansas City, MO 64147-1207	8	U.S. Total Army Personnel Command 200 Stoval Street Alexandria, VA 22332-0400
2	Air Reserve Personnel Center/DSMR 6760 E. Irvington Pl. #4600 Denver, CO 80280-4600	6	National Archives & Records Admin. Old Military and Civil Records (NWCTB- Military), Textual Services Division 700 Pennsylvania Ave., N.W. Washington, DC 20408-0001	9	Commander USAEREC Attn: PCRE-F 8899 E. 56th St. Indianapolis, IN 46249-5301
3	Commander CGPC-Adm-3 U.S. Coast Guard 2100 2nd Street, S.W. Washington, DC 20593-0001	7	Commander U.S. Army Reserve Personnel Command ATTN: ARPC-ALQ-B 1 Reserve Way St. Louis, MO 63132-5200	10	Naval Personnel Command 5720 Integrity Drive Millington, TN 38055-3130
4	Headquarters U.S. Marine Corps Personnel Management Support Branch (MMSB-10) 2008 Elliot Road Quantico, VA 22134-5030			11	Department of Veterans Affairs Records Management Center P.O. Box 5020 St. Louis, MO 63115-5020
				12	Army National Guard Readiness Center NGB-ARP 111 S. George Mason Dr. Arlington, VA 22204-1382
				13	The Adjutant General (of the appropriate state, DC, or Puerto Rico)
				14	National Personnel Records Center (Military Personnel Records) 9700 Page Avenue St. Louis, MO 63132-5100

PRIVACY ACT OF 1974 COMPLIANCE INFORMATION

The following information is provided in accordance with 5 U.S.C. 552a(e)(3) and applies to this form. Authority for collection of the information is 44 U.S.C. 2907, 3101, and 3103, and E.O. 9397 of November 22, 1943. Disclosure of the information is voluntary. If the requested information is not provided, it may delay servicing your inquiry because the facility servicing the service member's record may not have all of the information needed to locate it. The purpose of the information on this form is to assist the facility servicing the records (see the address list) in locating the correct military service record(s) or information to answer your inquiry. This form is then filed in the requested military service record as a record of disclosure. The form may also be disclosed to Department of Defense components, the Department of Veterans Affairs, the Department of Transportation (Coast Guard), or the National Archives and Records Administration when the original custodian of the military health and personnel records transfers all or part of those records to that agency. If the service member was a member of the National Guard, the form may also be disclosed to the Adjutant General of the appropriate state, District of Columbia, or Puerto Rico, where he or she served.

PAPERWORK REDUCTION ACT PUBLIC BURDEN STATEMENT

Public burden reporting for this collection of information is estimated to be five minutes per response, including time for reviewing instructions and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of the collection of information, including suggestions for reducing this burden, to National Archives and Records Administration (NHP), 8601 Adelphi Road, College Park, MD 20740-6001. DO NOT SEND COMPLETED FORMS TO THIS ADDRESS. SEND COMPLETED FORMS AS INDICATED IN THE ADDRESS LIST ABOVE.